



State of Washington Application for a Water Right

Please follow the attached instructions to avoid unnecessary delays. **TWO RIVERS ACCLIMATION SITE**

For Ecology Use

Fee Paid 6-26-02

Date 6/26/02

Section 1. APPLICANT - PERSON, ORGANIZATION, OR WATER SYSTEM

Name: Yakama Nation Fisheries Home Tel: () -
Mailing Address: PO Box 151 Work Tel: (509) 865-6262
City: Toppenish State: WA Zip+4 98948 + FAX: (509) 865-6293 -

Section 2. CONTACT - PERSON TO CALL ABOUT THE APPLICATION

☐ Same as above

Name: Tom Scribner Home Tel: () -
Mailing Address: 4067, NE 23rd Ave Work Tel: (503) 331-9850 -
City: Portland State: OR Zip+4 97212 + FAX: (503) 331-9892 -
Relationship to applicant: Employee

Section 3. STATEMENT OF INTENT

The applicant requests a permit to use not more than 1,080 gpm (x gallons per minute or ☐ cubic feet per second) from a ☐ surface water source or ☒ ground water source (check only one) for the purpose(s) of Acclimation of coho salmon smolts

ATTACH A "LEGAL" DESCRIPTION OF THE PLACE OF USE. (See instructions.) NOTE: A tax parcel number or a plat number is not sufficient.

Estimate a maximum annual quantity to be used in acre-feet per year: 267
Check if the water use is proposed for a short-term project. Indicate the period of time that the water will be needed:
From: March, April and May of each year

Section 4. WATER SOURCE

IF SURFACE WATER	IF GROUNDWATER
Name the water source and indicate if stream, spring, lake, etc. If unnamed, write "unnamed spring," "unnamed stream," etc.: Number of diversions: _____	A permit is desired for <u>1</u> well(s) or shallow infiltration gallery.
Source flows into (name of body of water):	Size & depth of well(s): <u>Undetermined</u>
LOCATION	

Enter the north-south and east-west distances in feet from the point of diversion or withdrawal to the nearest section corner: The groundwater withdrawal area is 1,500' north and 1,600' east of the southwest corner of section 15.

¼ of	¼ of	Section	Township	Range(E/W)	County	If location of source is platted, complete below:		
						Lot	Block	Subdivision
NW	SW	S15	27N	16E	Chelan			

For Ecology Use Date Received: 06-26-2002 Priority Date: JUNE 26, 2002 CHELAN
SEPA: ☒ Exempt / Not Exempt FERC License # _____ Dept. Of Health # _____
Date Accepted As Complete 07-22-2002 By [Signature] Date Returned _____ By _____ WRIA: 45

APPLICATION

Rev. 7/97 * * f

Appl. No.: G4-34559

Enter the north-south and east-west distances in feet from the point of diversion or withdrawal to the nearest section corner: **The groundwater withdrawal area is 1,500' north and 1,600' east of the southwest corner of section 15.**

¼ of	¼ of	Section	Township	Range(E/W)	County	If location of source is platted, complete below:		
						Lot	Block	Subdivision
NW	SW	S15	27N	16E	Chelan			

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SEPA: Exempt/Not Exempt FERC License # _____ Dept. Of Health # _____

Date Accepted As Complete 07-22-2002 By [Signature] Date Returned _____ By _____ WRIA: 45

45
Chelan

APPLICATION

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Section 5. GENERAL WATER SYSTEM INFORMATION

- A. Name of system, if named: _____
- B. Briefly describe your proposed water system. **(See instructions.)**
- Water will be removed with a 12VDC pump for the test incubation of coho salmon eggs.
This is a non-consumptive use.
- C. Do you already have any water rights or claims associated with this property or system? ☐ YES ☒ NO
PROVIDE DOCUMENTATION.

NON-
CONSUMPTIVE
USE

Section 6. DOMESTIC / PUBLIC WATER SUPPLY SYSTEM INFORMATION (Completed for all domestic/public supply uses.)

- A. Number of "connections" requested: _____ Type of connection _____
(Homes, Apartment, Recreational, etc.)
- B. Are you within the area of an approved water system? ☐ YES ☐ NO
If yes, explain why you are unable to connect to the system. *Note: Regional water systems are identified by your County Health Department.*

Complete C. and D. only if the proposed water system will have fifteen or more connections.

- C. Do you have a current water system plan approved by the Washington State Department of Health? ☐ YES ☐ NO
If yes, when was it approved? _____ Please attach the current approved version of your plan.
- D. Do you have an approved conservation plan? ☐ YES ☐ NO
If yes, when was it approved? _____ Please attach the current approved version of your plan.

Section 7. IRRIGATION/AGRICULTURAL/FARM INFORMATION

(Complete for all irrigation and agriculture uses.)

- A. Total number of acres to be irrigated: _____
- B. List total number of acres for other specified agricultural uses:
- | | |
|-----------|-------------|
| Use _____ | Acres _____ |
| Use _____ | Acres _____ |
| Use _____ | Acres _____ |
- C. Total number of acres to be covered by this application: _____

- D. Family Farm Act (Initiative Measure Number 59, November 3, 1977)

Add up the acreage in which you have a controlling interest, including only:

- ‡ Acreage irrigated under water rights acquired after December 8, 1977;
- ‡ Acreage proposed to be irrigated under this application;
- ‡ Acreage proposed to be irrigated under other pending application(s).

1. Is the combined acreage greater than 2000 acres? ☐ YES ☐ NO
2. Do you have a controlling interest in a Family Farm Development Permit? ☐ YES ☐ NO
If yes, enter permit no: _____

- E. Farm uses:
- Stockwater - Total # of animals _____ Animal type _____ (If dairy cattle, see below)
- Dairy - # Milking _____ # Non-milking _____

APPLICATION

Section 8. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water?

☒ YES ☐ NO

Fish rearing ponds will be constructed, see the attached design report.

NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point, and some portion of the storage will be above grade, you must also apply for a reservoir permit. You can get a reservoir permit application from the Department of Ecology.

Section 9. DRIVING DIRECTIONS

Provide detailed driving instructions to the project site.

North on Hwy 2 from Leavenworth, right on Hwy 207, left on Little Wenatchee Rd, left after 1 mile into the Two Rivers Gravel operation.

Section 10. REQUIRED MAP

- A. Attach a map of the project. (See instructions.) See attached report.

Section 11. PROPERTY OWNERSHIP

- A. Does the applicant own the land on which the water will be used? ☐ YES ☒ NO
If no, explain the applicant's interest in the place of use and provide the name(s) and address(es) of the owner(s):

Applicant leases property from the landowner.


Landowner: Two Rivers Inc., 7934 E Leavenworth Rd, Leavenworth, WA 98826

- B. Does the applicant own the land on which the water source is located? YES ☒ NO
If no, submit a copy of agreement:

I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though I may have been assisted in the preparation of the above application by the employees of the Department of Ecology, all responsibility for the accuracy of the information rests with me.

Tom Schuler
Applicant (or authorized representative)

6/7/2002
Date

 Donald E. Booth PRES.
Landowner for place of use (if same as applicant, write "same")

Jun 10 2002
Date APPLICATION

Use this page to continue your answers to any questions on the application. Please indicate section number before answer. **See the attached Two Rivers Design Report.**

We are returning your application for the following reason(s):	
_____ Examination fee was not enclosed	APPLICANT PLEASE RETURN TO CASHIER, PO BOX 5128, LACEY, WA 98509-5128
_____ Section number(s) _____ is/are incomplete	APPLICANT PLEASE RETURN TO THE APPROPRIATE REGIONAL OFFICE
Explanation: 	
<i>Please provide the additional information requested above and return your application by _____ _____ (date).</i>	

Ecology staff _____ Date _____

Ecology is an Equal Opportunity and Affirmative Action employer.

To receive this document in alternative format, contact the Water Resources Program at (360) 407-6604 (Voice) or (360) 407-6006 (TDD).

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